PARENT/GUARDIAN PERMISSION FOR EXCURSION

Organization: Scarborough Association for Mathematics Education .
Co-ordinator: Mrs. D. Drape and Mrs. M. Fox .
Grade(s): 7 & 8 . Number of Students: _____.

To Parents and Guardian:
The purpose of this form is to inform you of the excursion and to seek your support and permission for your child to participate.

Educational purpose of the excursion: the students have an opportunity to participate in the provincial Math Olympics, compete for their region, and spend time with other grade seven and eight students who share the same passion for mathematics. .

Travel Arrangements:
Departure from : _____
Date: Friday, May 26, 2006 . Time: _____
Return to : _____
Date: Saturday, May 27, 2006 . Time: approx. .
Mode of transportation: _____

Requirements for participants:
Food/Snacks provided . Money: _____.
Notebook _____. Clothing and equipment _____.
Other all towels and bedding are provided .

As part of the excursion students will be participating in an overnight stay. Details as follows:

Accommodation: residences at University of Toronto, Scarborough Campus .
Financial Arrangements:
Total Cost per person: _____ To be paid by student: _____

Excursion staff:
Teacher in charge: _____
Supervising teachers: _____

Accompanying this page please find an additional form which needs to be filled out and returned by: _____

i) a medical information form

Both of the forms are to be filled out, in full, and returned to: the coaches *in order to ensure that your child has a safe and enjoyable trip.*

I have read the form(s) and give my permission for my son/daughter to participate in the above excursion.

Student's Name: _____

Signature of Parent/Guardian: _____